



CITY OF TUCSON
DEVELOPMENT SERVICES DEPARTMENT
ENGINEERING DIVISION
INFORMATION REQUEST FORM
FOR AN
ELEVATION CERTIFICATE

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APPLICANT INFORMATION

Name: _____ Date: _____
Company: _____ Phone: _____ Fax: _____
Street Address: _____
Major Intersections: _____

SECTION A – PROPERTY INFORMATION

- A1. BUILDING OWNER'S NAME: _____
- A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

Tucson, Arizona Zip Code: 85_____
- A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

- A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)

DO NOT WRITE BELOW THIS LINE - FOR DSD USE ONLY

Researched By: _____ Date: _____

For immediate completion of the Community Portion (Section A and Section B) of an Elevation Certificate, visit our Engineering Counter at located at 201 N. Stone Ave., 1st Floor or send a self-addressed stamped envelope with a check made payable to City of Tucson for \$37.50 to COT-DSD/Engineering Division, P.O. Box 27210, Tucson, AZ 85726-7210.